

Virtual Capacity-building Sessions for Correctional Linkage to Care (CLTC)

Session 3



Navigating Zoom



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Navigating Zoom



Audio



Annotate



Video



Breakouts



Chat



Technical problems?
Send a message to
Molly Rafferty or email
molly_rafferty@jsi.com

WELCOME!



Introductions

- Your name and pronouns (e.g., she, he, they)
- Your organization
- Your role in CLTC services





Poll Question

Which of the following terms do you use?

Submarine sandwich (sub)

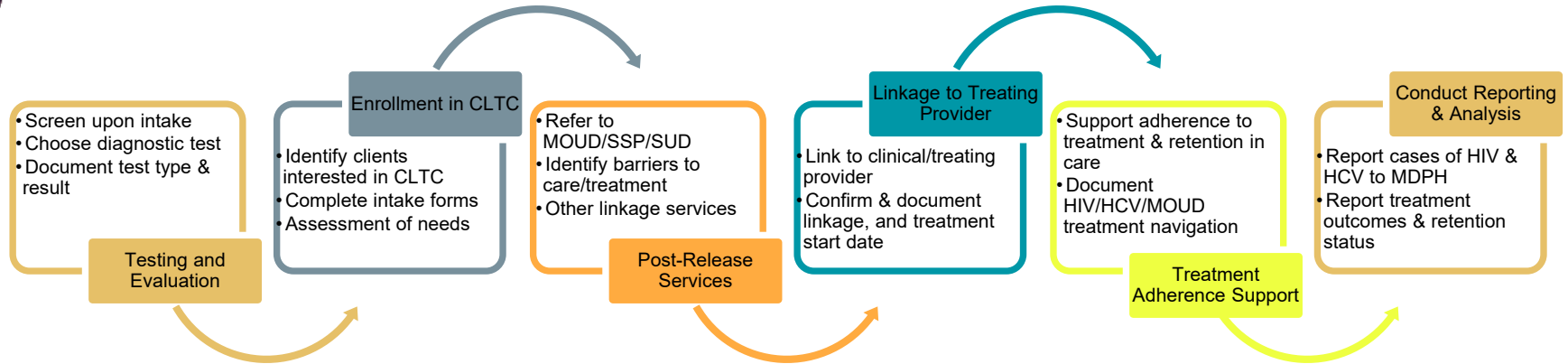
Grinder

Hoagie

Other

No idea what you're talking about

CLTC Indicators – Components of Service



CLTC Indicators – Broad Overview

No.	Steps for Testing and Treatment	Process Indicators (Required Indicators are in bold)		Outcome Indicators (Care Cascade) (Required Indicators are in bold)			
		No.	Indicator	No.	Indicator		
1	<u>Testing and Evaluation:</u> -Screen upon intake (clients are screened for eligibility by means of confirmed HIV and/or HCV diagnosis) -Choose appropriate diagnostic test -Report test results	a.	# HCV-antibody tests conducted	Required	c. #/% Clients tested for HCV (among all screened)	Required	
		b.	# Confirmatory HCV RNA tests conducted	Required	d. #/% NAT positive clients (among those tested)	Required	
					e. #/% Clients with positive HCV-antibody test and negative HCV RNA result (among those tested)	Required	
2	<u>Enrollment in Correctional Linkage to Care (CLTC) Service:</u> -Identify clients who may be interested in CLTC services -Complete intake forms to enroll clients in the service -Perform assessment of needs		# Clients referred to CLTC				
		a.	Stratification by correctional referral type (e.g., out-posted testing staff, HOCV staff, etc.)	Required	c. #/% Clients enrolled in CLTC	Required	
3	<u>Post-Release Services</u> -Refer clients to Medication Opioid Use Disorder (MOUD) and/or SSP/OEND/SUD support services -Identify client barriers to care/treatment -Other linkage services (e.g., transportation assistance, housing,	b.	# CLTC intake forms completed	Required	b.	# Clients linked to MOUD/SSP/SUD service provider(s) Stratification by linkage type	Required
		a.	# Clients referred to MOUD/SSP/SUD support services Stratification by referral type	Recommended	c.	# Clients linked to MOUD/SSP/SUD support services within 30 days (*linkage to MOUD should be done within 7 days)	Required
4	<u>Linkage to Medical Care:</u> -Link to clinical/treating provider post-release -Confirm and document linkage to treatment -Document treatment start date	a.	# Clients referred to care through CLTC services	Required	d. #/% HCV+ who initiate HCV treatment (among all NAT positives)	Required	
		b.	# HCV+ Clients who attend initial visit with treating provider, post-release	Required	e. #/% Clients who initiate HCV treatment within 30 days of release (among all NAT positives)	Required	
		c.	# HIV+ Clients who attend initial visit with treating provider, post-release	Required	f. #/% HIV+ clients linked to medical/treating provider (among all HIV positives)	Required	
5	<u>Treatment Adherence Support:</u> -Support adherence to treatment and retention in care -Document HIV & HCV treatment navigation activities	a.	# Visits with medical/treating provider Stratification by disease type (e.g., HIV or HCV)	Recommended	d. #/% Clients who have completed treatment (among all NAT positives)	Required	
		b.	# HCV RNA tests of cure conducted Stratification by ordering provider if applicable	Required	e. #/% Clients retained in care (among all NAT positives) Stratification by type of adherence support provided	Required	
					f. #/% Clients who interrupt HCV treatment due to re-incarceration	Recommended	
		c.	# Clients who are out-of-care, or have failed to engage in medical care necessary to treat and/or cure disease Stratification by testing facility	Required	g. #/% Clients who are virally suppressed, or in continuous care for 12 or more months with a CD4 cell count >350 cells/mm ³ or viral load of <200 copies/mL (among all HIV+ cases)	Required	
					h. #/% Clients retained in care (i.e., with up-to-date viral loads and/or CD4 counts, and 2 or more visits per year with a medical provider for routine HIV medical care)	Required	
6	<u>Conduct Reporting and Analysis</u> -Report cases of HIV & HCV to Massachusetts Department of Public Health (MDPH) -Report treatment outcomes, including date and treatment retention status -Report clients who are out-of-care, or clients who require treatment re-engagement	a.	# HCV cases reported	Required			
		b.	# HIV cases reported	Required			
		c.	# Cases engaged in care (i.e., undergoing treatment, and/or receiving treatment adherence support)	Required	d. #/% Cases reported on-time to MDPH	Recommended	

The background is a blurred image of a financial chart or spreadsheet. A white pen is positioned in the upper right corner, pointing towards the center. The chart features a line graph with several peaks and troughs. Faint numerical values are visible, including '2.5' on the left and '2.47' on the right. The overall color palette is light blue and white, with a soft, out-of-focus effect.

**WHERE SHOULD I REPORT
SERVICE COMPONENTS?**

CAREWare

PI 2b: # CLTC intake forms completed

Find Client > Search Results > Demographics > Services > Add Service > Add Service

Save Back

Next

Client: William O'Connor Jr.

Date: 11/25/2019

Service Name: CLTC Intake/Initial Assessment

Contract: July 1, 2019 - June 30, 2020 (State)

Units: 4

Price: 0.00 \$

Total: 0.00 \$

Referred by: Jail
Testing Provider

Find Client > Search Results > Demographics > Services > Add Service > Add Service

Save Back

Next

Client: William O'Connor Jr.

Date: 10/28/2019

Service Name: CLTC Referrals (non medical)

Contract: July 1, 2019 - June 30, 2020 (State)

Units: 2

Price: 0.00 \$

Total: 0.00 \$

Correctional Referral Type: Legal

Status of Referral: Closed

Confirmation of Referral Date: 10/30/2019

Component 4 (Linkage to Medical Care) PIs & OIs

CAREWare (cont.)

Search Results > Search Results > Demographics > Services > Add Service

Save Back

Add Service

Client: William O'Connor Jr

Date: 8/24/2021

Contract: July 1, 2021 - June 30, 2022 (State)

Service Category: Non CARE Act Service

Service Name: CLTC linkage to Drug Assistance

Page 1 of 1

- CLTC Linkage to Drug Assistance
- CLTC Linkage to HCV Medical Appointment
- CLTC Linkage to HCV Short-Term Health Navigation
- CLTC Linkage to Health Insurance
- CLTC Linkage to MAT

Go To

Go To B

Component 3 OIs:

- OI 3b: # Clients linked to MOUD/SSP/SUD service provider(s)
- OI 3c: # Clients linked to MOUD/SSP/SUD support services within 30 days
(*linkage to MOUD should be done within 7 days)



**HOW CAN I SEE MY INDICATORS
REPRESENTED IN MY
DATA/REPORT(S)?**

CAREWare Financial Report

Description	Count
Total Number of Clients	28
Total Number of Newly Enrolled Clients	14

Service Category	Subservice	No of clients	Total Units
Non CARE Act Service	CLTC Client Communication (in-person)	1	4
	CLTC Client Communication (not in-person)	20	84
	CLTC Communication with medical provider	6	14
	CLTC Communication with non-medical provider	6	11
	CLTC Intake/Initial Assessment	14	14
	CLTC Referrals (non medical)	1	2
	CLTC Released from incarceration	2	2

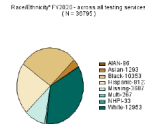
Other Reports

ITLS Dashboard Report

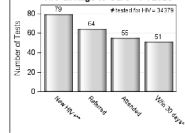
MASSACHUSETTS DEPARTMENT OF PUBLIC HEALTH OFFICE OF HEALTH CARE PLANNING
 JAN FY2020 - Monthly Dashboard Report - AGGREGATE
 Data Current as of: 1/26/2020
 Data Generated: 1/26/2020

HIV/HCV/STTB Testing - Priority Populations

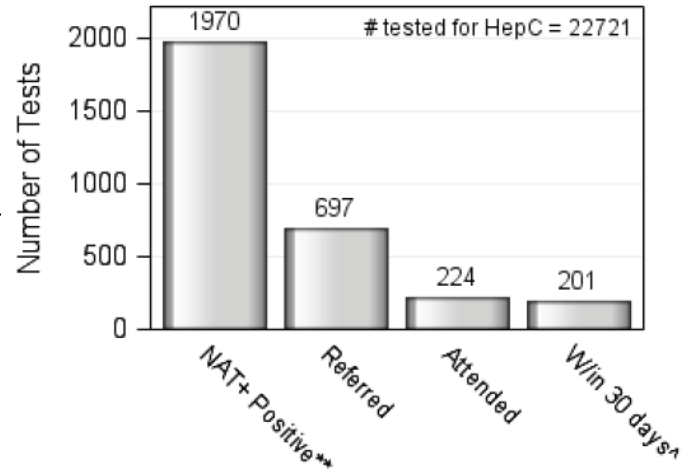
Priority population	Tests	%
Any priority population	21262	98.7%
-MEM	6201	17.1%
-PWD	4974	13.7%
-Non-US Born	11291	31.2%
-Born in Public Room or US	1325	3.7%
-Dependents	204	0.7%
-Transgender	204	0.7%
TOTAL (all populations)	36224	100.0%



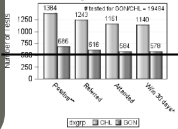
HIV Linkage to Care - FY2020



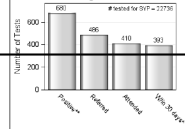
HepC Linkage to Care - FY2020



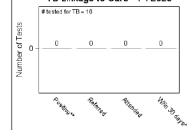
GONCHL Linkage to Care - FY2020



GYP Linkage to Care - FY2020



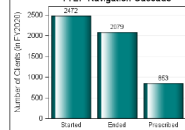
TB Linkage to Care - FY2020



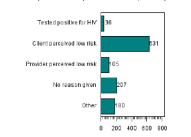
SHORT-TERM HEALTH NAVIGATION***

STHW Type	# Started	Ended	Positive Outcome
HepC treatment	805	300	173
LTBI treatment	0	0	0
Mental health	222	173	140
Housing	271	233	178
Primary care	1816	1873	1441
Substance use	1202	1108	1084

PrEP Navigation Cascade



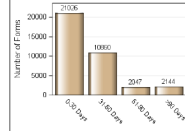
Top reasons not prescribed PrEP (N=1217)



SYRINGE SERVICE PROGRAM DATA

supfield	JAN	FY2020
Syringes in (#)	12033	1210835
Syringes out (#)	147152	1278171
Unrec. clients (#)	2175	11960
Prescribed PrEP (#)	4	37
Substance use referrals (#)	180	1731
Narcotic referrals (#)	531	3623
Testing referrals (#)	179	1664
PrEP referrals (#)	105	720
STHW referrals (#)	260	1730

ITLS Form Submission Timeliness



*MEM = Member of Household; PWD = Public Housing; STTB = Sexually Transmitted Bacterial Infection.
 **The number of positives in the linkage to care shows eligible persons who test positive and are already in care. For example, the number of positives and eligible patients who were critically ill.
 ***A "positive outcome" is a indication of any treatment completion, linkage to a provider, change in health status, medication, or any successful OIHS activity not otherwise specified in FY20.
 Only completed registrations with a test and not data in FY20 are included in the "linked patient" category.
 *If no appointment date was recorded in the Testing & Linkage form, case clients will not be included in the "Win 30 days" group.



Storing Your Data Internally

- Storing your data internally allows for greater internal awareness of your program's data/activities, ability to perform your own data validation, ability to evaluate your program's data internally and create your own reports
- No “one-size-fits-all” solution
- Suggestions:
 - Secure web applications (e.g., REDCap)
 - Electronic Medical Records (EMR)
 - Relational databases (e.g., SQL, cloud-based relational databases, etc.)
 - Locked Excel file
- Considerations:
 - Accessibility – how often do I (and my colleagues) need to access the data?
 - Data privacy & security – ensuring data can only be accessed by internal staff, HIPAA, etc.
 - User friendliness – who needs to access the data and can they navigate the system?

**WHERE CAN I KEEP TRACK OF
“RECOMMENDED” INDICATORS?**





Recommended Indicators

- You are not required to report on recommended indicators/components
- Keeping track of recommended indicators can provide you with a more holistic picture of your program's success in the CLTC continuum of care
- Recommend documenting these metrics internally
- Data quality benefits
 - E.g., process indicator 3a: # Clients referred to MOUD/SSP/SUD support services
 - Knowing the number of MOUD referrals that your program made can give you a better picture of this component's success when reading the number of clients successfully linked to MOUD services post-release in your reports

Questions & Clarifications

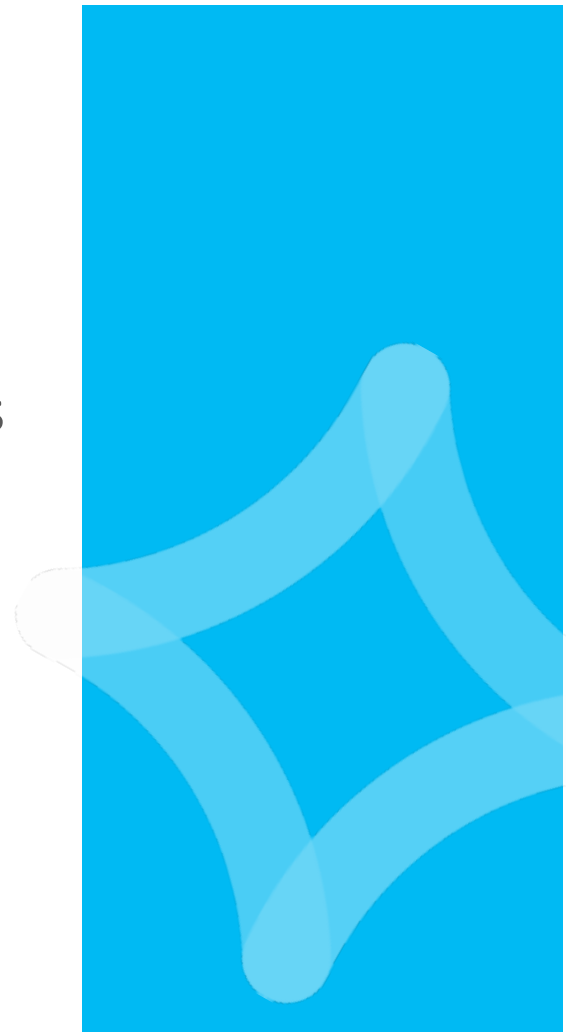


CAREWare Data & Reporting



Agenda

- Refresher: Indicators & data requirements
- Your CLTC data!
- CAREWare reports
- CAREWare MA support and resources



Refresher: CLTC Data Requirements

Resource document posted to
carewarema.jsi.com > Services & Definitions

CAREWare MA
CLTC Data Requirements

October 2020

Yellow highlights indicate changes since the last version.

This document describes the CAREWare data entry requirements for the Correctional Linkage-to-Care (CLTC) program.



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Refresher: Subservice Units

- Activities (e.g., assessment, linkage, referrals): enter “1” unit when completed
- Encounters, visits, communication: enter “1” unit for each 15 minute increment

Subservice Definitions

October 2020

Use this document to look up the definitions for the subservices your agency is funded for.

Yellow highlights indicate changes since the last version.



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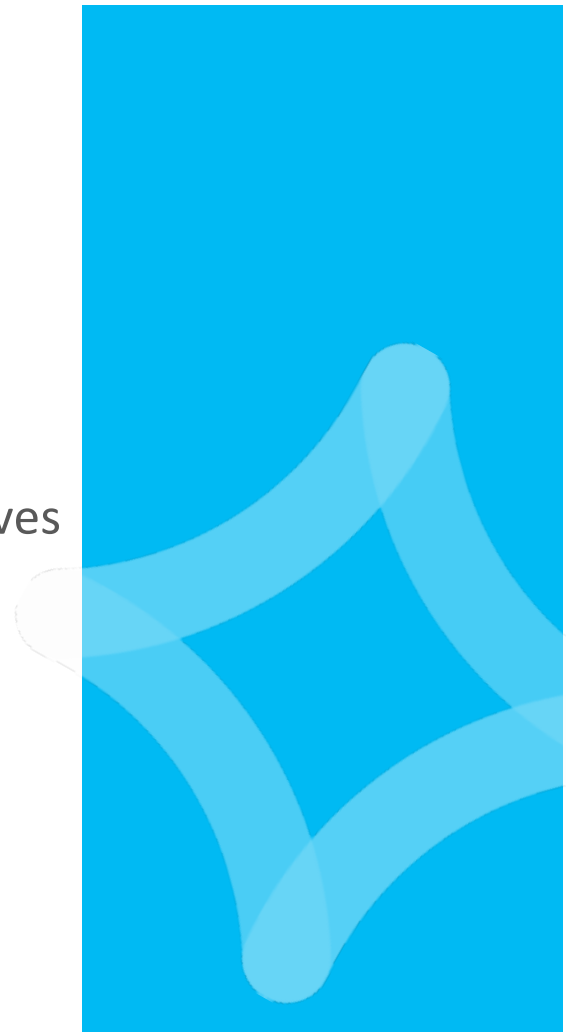
OHA Subservice	Unit (if applicable)	Subservice Definition
MEDICAL CASE MANAGEMENT		

Refresher: Referrals and Linkages

- Enter the type, status, confirmation of referral/linkage date
- Enter a service for each referral/linkage the client receives

View

Provider:	MDPH
Date:	9/30/2019
Service Name:	CLTC Linkage to Medical Care
Contract:	July 1, 2019 - June 30, 2020 (State)
Units:	2
Price:	0.00 \$
Total:	0.00 \$
Linkage Type:	HIV
Linkage Status:	Open
Confirmation of Linkage Date:	10/4/2019



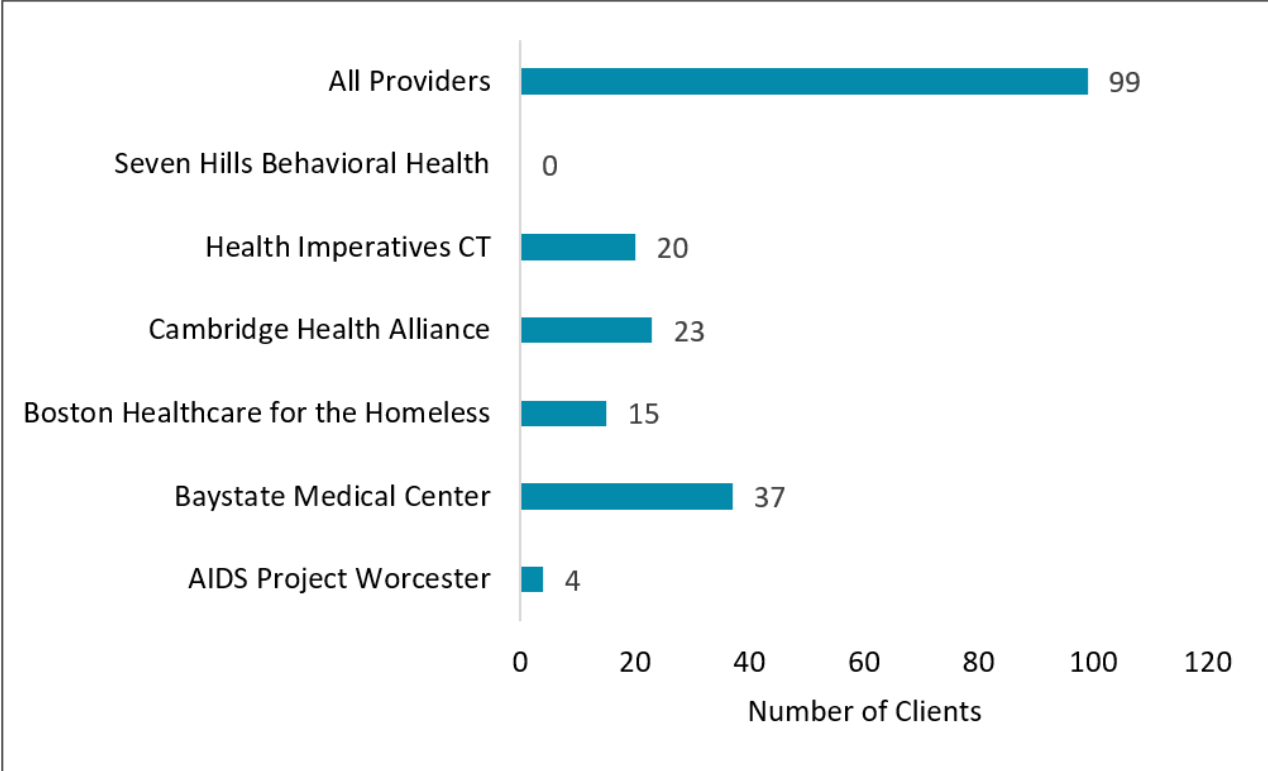
Refresher: Other CLTC Fields

- For intake/initial assessment:
 - Referred by (jail, testing provider)
- Date closed out of CLTC services
- Reason for closing:
 - Deceased
 - Declined further follow-up
 - Linked to care
 - Lost to follow-up



Your CLTC data! July 2020 to June 2021

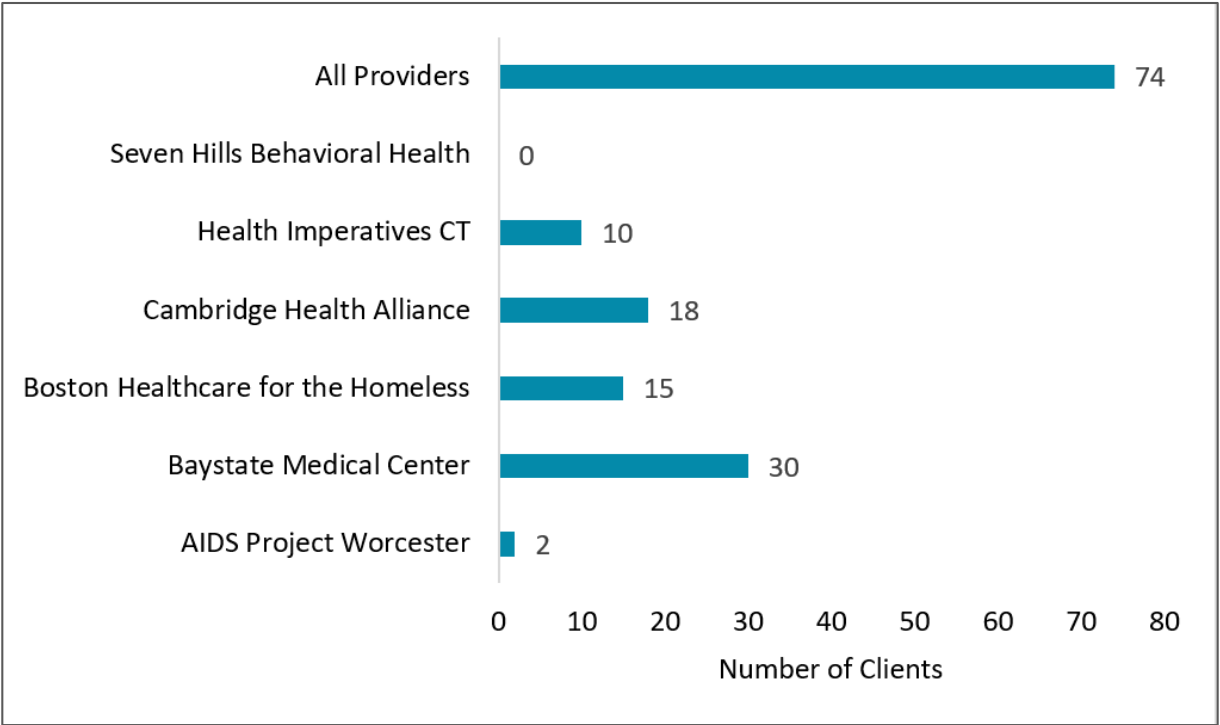
Indicator: Number of clients enrolled in CLTC



Financial Report:
Look at “CLTC
Intake/ Initial
Assessment”

Your CLTC data! July 2020 to June 2021

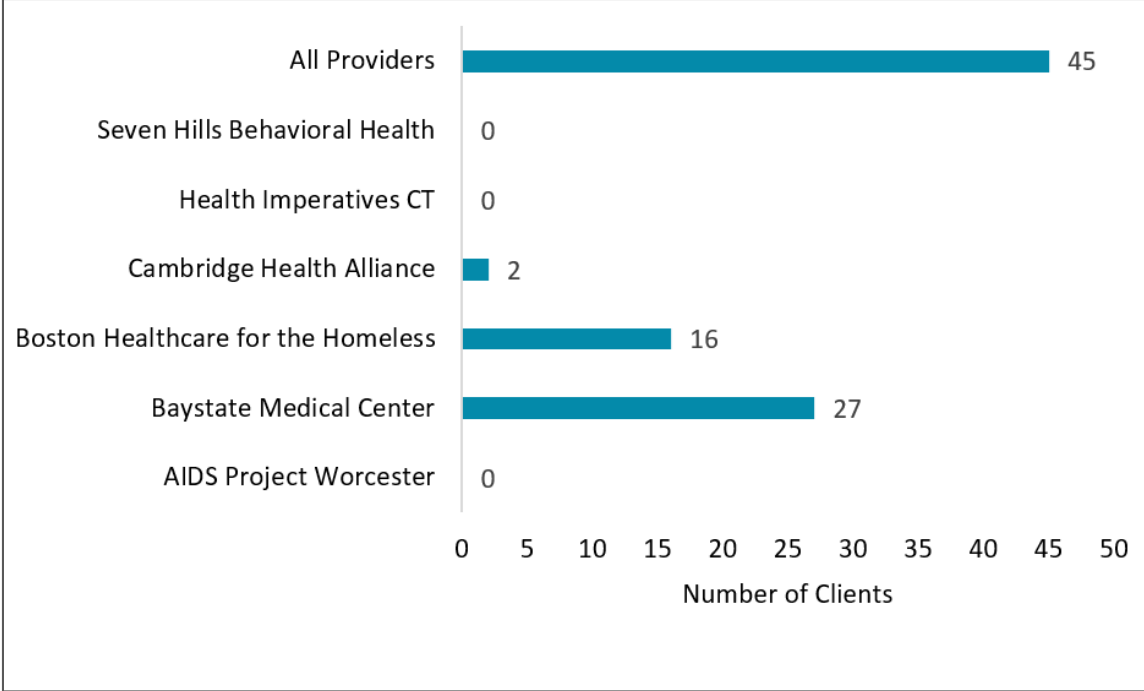
Indicator: Number of clients released from incarceration



Financial Report:
Look at “CLTC
Released from
incarceration”

Your CLTC data! July 2020 to June 2021

Indicator: Number of clients referred to MOUD

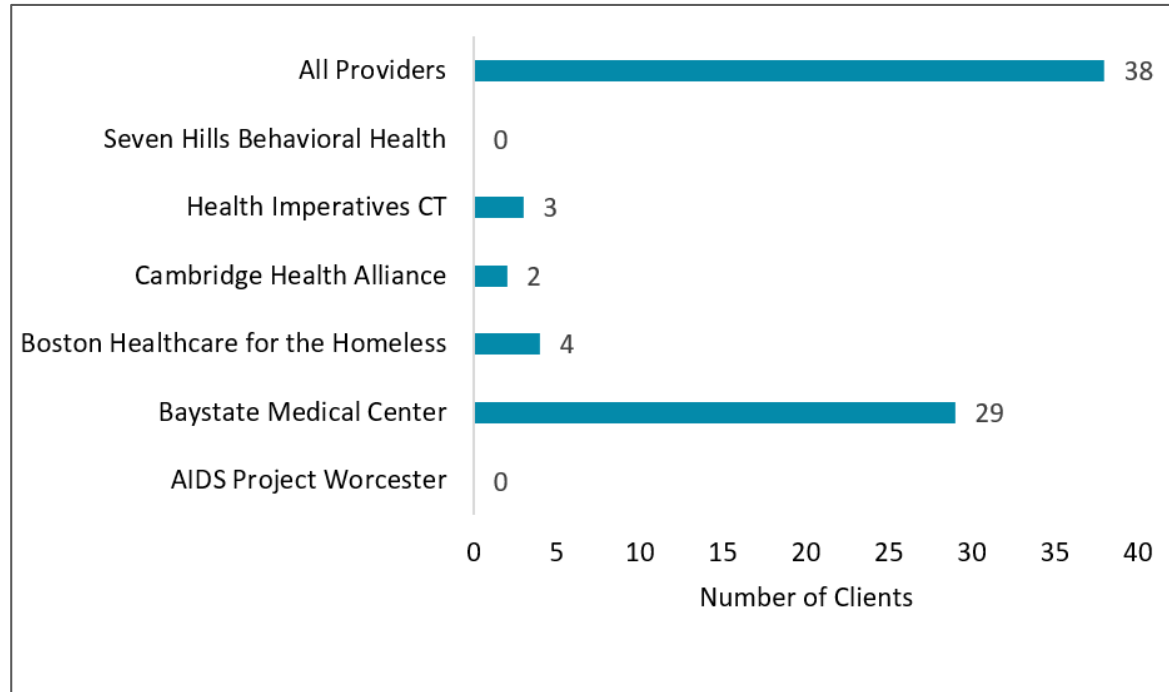


Financial Report:
Look at “Linkage to
MAT/MOUD”

Financial Report:
Look at “CLTC
Linkage to Medical
Care”

Your CLTC data! July 2020 to June 2021

Indicator: Number of clients linked to medical/treating provider



CAREWare Reports

- Run the **Financial Report** on a monthly basis to check the CLTC services entered
- Run the **Service Detail** report to see a list of services entered for each client within the time frame
- Run the **Referral (Medical) Completion (Agency)** and **Referral (Non-Medical) Completion (Agency)** reports to make sure confirmation dates are complete

Instructions for Data Reports

February 2021, v2.2

Yellow highlights indicate changes since the last version.

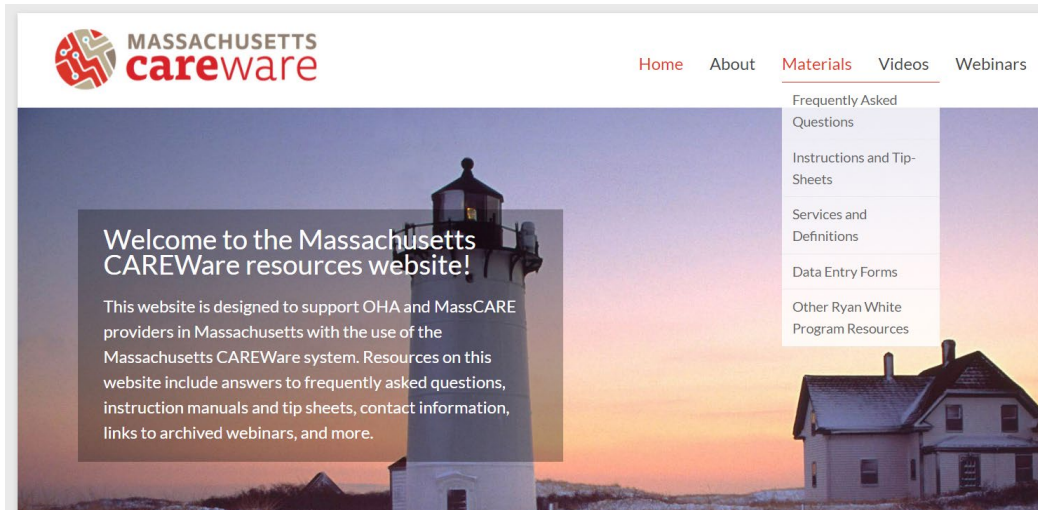


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This document describes the data reports that are available in the Massachusetts CAREWare system, and provides instructions on how to run them.

CAREWare MA Support & Resources

- Find resources at <http://carewarema.jsi.com/> under “Materials.”



The screenshot shows the homepage of the Massachusetts CAREWare resources website. The header features the logo on the left, which consists of a red and white circular icon with a circuit-like pattern, followed by the text "MASSACHUSETTS careware" in a sans-serif font. To the right of the logo is a navigation menu with the following items: "Home", "About", "Materials" (which is highlighted with a red underline), "Videos", and "Webinars". Below the navigation menu is a large banner image of a lighthouse and a house at sunset. Overlaid on the left side of the banner is a white text box with the following content:

Welcome to the Massachusetts CAREWare resources website!

This website is designed to support OHA and MassCARE providers in Massachusetts with the use of the Massachusetts CAREWare system. Resources on this website include answers to frequently asked questions, instruction manuals and tip sheets, contact information, links to archived webinars, and more.

Below the navigation menu, a dropdown menu is open under the "Materials" link, listing the following resources:

- Frequently Asked Questions
- Instructions and Tip-Sheets
- Services and Definitions
- Data Entry Forms
- Other Ryan White Program Resources



CAREWare MA Support & Resources

- Go to www.CAREWareMA.jsi.com
- Email CAREWareMAhelpdesk@jsi.com
- Call 617-385-3991
- Fax 617-482-0617

Welcome Becky Milner!





Poll Questions

Do CLTC staff review the service data entered into CAREWare?

Yes/No/Don't know

Are CAREWare reports shared with CLTC staff?

Yes/No/Don't know

Do you use a spreadsheet or other mechanism to track CLTC services?

Yes/No/Don't know

Questions & Clarifications



BREAK



Interview with Baystate



Question & Answer





Group Discussion

- What additional training do you need for CAREWare?
- What ideas do you have about using your data to inform service delivery?
- What additional training or technical assistance do you need to increase the number of individuals referred and enrolled in CLTC, and linked to medical care and/or SUD/MOUD?

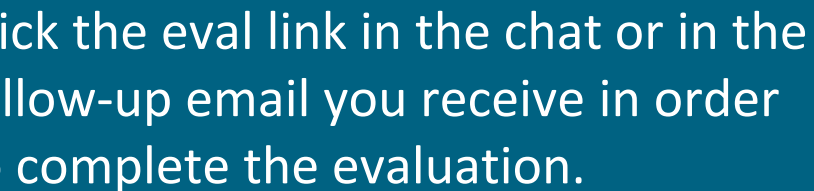
Thank you!





Please Complete the Evaluation!

- Your feedback in the evaluation helps us plan future sessions and address your TA needs.
- Your feedback is appreciated!



Click the eval link in the chat or in the follow-up email you receive in order to complete the evaluation.



Contact Us

TA4SI@jsi.com



Implemented by JSI under contract # INTF4971M04500824092 with the Massachusetts Department of Public Health, Bureau of Infectious Diseases and Laboratory Sciences.